APPLICATION FOR PERMIT HEATING - VENTILATING - AIR CONDITIONING

COUNTY OF LOS ANGELES 3/37 5 12 8 BUILDING AND SAFETY

3037				92/2	
FOR APPLICANT TO FILL IN (PRINT OR TYPE ONLY)				BUILDING ADDRESS 22308-3 Harbor Ridge	
NO.	TYPE OF APPLIANCE OR EQUIPMENT		F	EE	LOCALIT Course
	ABSORPTION UNIT, BTU		A .		CROSS ST. 734176 unit 95
				†	OWNER W & B BUILDERS
<u> </u>	AIR HANDLING UNIT, CFM			+	MAIL 1666 DTU CTD
	BOILER, BTU			 	CITY SANTA MONICA CA
/	COMPRESSOR, BTU 36, 100		10	<u> - </u>	CONTRACTORY HEATING SERVICE, INC.
	VENTILATION SYSTEM				LOCAL E IMPERIAL HIGHWA
	EVAPORATIVE COOLER				SANTA FE SPRINGS. OF
	FURNACE: FAUGRAVITY FLOORBTU		-		STATE LICENSE NO. 14293 LIC. CLASS C-36
	HEATER: SUSPENDEDUNIT.		 -	†	APPROVALS DATE INSPECTOR'S SIGNATURE
	WALL				ROUGH
				 	FINAL 12/12/80 Belive
		-			INSPECTION RECORD
Plan check fee 25% of above.					
PERMIT ISSUING FEE \$			1	-	
	TOTAL FEE		17	N	
PLAN CHECK APPLICANT				PLAN CHECK VALIDATION	
NAME				- Ew Check Well Mylon	
ADDRESS					
CITY TEL. NO.					
I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL ORDINANCES AND LAWS REGULATING HEATING, VENTILATING, AIR CONDITIONING. I HEREBY CERTIFY THAT LAM NOT ACTING IN VIOLATION OF CHAPTER 9, DIVISION 3, OF THE BILLINESS AND PROFESSIONAL CODE OF THE STATE OF CALIFORNIA.				PERMIT VALIDATION 28138A # • • • • 41	
OF PERMITTEE ISTRICT NO. PROCESSED BY					1 • • 1 7 0 0 • • • 1 7 0 0 5 0 5 1 3 - 8 0
12.90 120					

INSPECTOR COPY